

Catheter Ablation for Atrial Fibrillation

What is it?

Catheter ablation is a treatment for people who desire a cure for their atrial fibrillation rather than take drugs. Ablation uses one of 3 different technologies:

1. Heat therapy: This uses electricity (RF) to heat the tip of the catheter to treat the areas in the heart that is responsible for atrial fibrillation.
2. Cold therapy: This type of ablation uses extreme cold to “freeze” the areas in the heart that is responsible for atrial fibrillation.
3. Electrical therapy: This uses non-thermal electrical impulses to selectively treat the areas in the heart that is responsible for atrial fibrillation.

Pre-procedural preparation:

You will usually need to commence a strong blood-thinner prior to the procedure, and Prof Sy will advise you specifically about the management of blood thinners leading up to the procedure.

You will also undergo a CT scan to create a computer map of your heart.

You will also be prescribed a medication to reduce acid in the food pipe.

Your ablation:

Upon arrival to the lab, you will be greeted by the nurses who will be looking after you. Once you get comfortable on our table, you will be attached to a blood pressure machine and heart monitor. Typically the procedure is performed under general anesthesia. A transoesophageal echocardiogram (special ultrasound of the heart performed though the food pipe) is usually performed at the start of the procedure. The skin

will be cleaned and you will be covered by sterile drapes. Small hollow tubes will be inserted into your leg veins. Through these tubes, small wires are advanced into your heart. Ablation is then performed to the areas in the heart that is responsible for atrial fibrillation using either electrical pulses or heat or cold energy. We then pull out all the wires and press on the site for 5-10 minutes. You will usually be required to lie flat for 4 hours to allow the site to heal.

Post-ablation instructions:

You will stay overnight in hospital and be reviewed in the morning prior to being discharged.

You will be prescribed a very specific course of medications which may differ from your pre-operative medications. Please check with staff about each medication and their intended duration prior to discharge.

Please make an appointment to see Dr Sy in 4 weeks.

Please notify Dr Sy's clinic immediately if you develop heart racing, chest pain, pain on swallowing, fever.

Please go to the closest emergency department if you experience symptoms suggestive of a stroke (eg. Weakness or numbness on one side of body, visual changes, speech difficulties etc..) or injury to food pipe (fever >38 deg Celsius; central chest pain during swallowing)

Risks

As for all medical procedure, there are risks. The overall risk of a complication is only 1-4% and include:

- Stroke
- Damaging the heart wall requiring urgent surgical repair
- Damage to blood vessels (incl. narrowing of the pulmonary veins)
- Severe injury to food pipe
- Damage to surrounding nerves (incl. nerve to the diaphragm)

FAQ's

Q. How long will my ablation take?

A. On the average, 3-4 hours (depending on the complexity of the problem – the doctor will discuss this with you)

Q. Does ablation damage my heart?

A. The ablation usually does not affect the overall function of your heart.

Q. Which doctors would perform the ablation?

A. Dr Sy will be in charge and he will supervise the ablation. He works with a team of doctors, nurses and technicians to make sure the ablation is done properly and safely.

Other resources

www.hrsonline.org (Heart rhythm society)

Patient notes

CONTACT NUMBERS:

Clinic:

Hospital:

Procedure Date:

Procedure Time:

Patient notes

